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United States Bankruptcy Court Northern District of Georgia, Atlanta Division				Voluntary Petition		
Name of Debtor (if individual, enter Last, First, Middle): Brincefield, Ronnie Lee		Name of Joint Debtor (Spouse) (Last, First, Middle):				
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): None	years	1	mes used by the Join ied, maiden, and trac		the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all): 7992	ver I.D. (ITIN) No./Complete EIN	Last four digit (if more than o	s of Soc. Sec. or Indone, state all):	ividual-Taxp	payer I.D. (ITI	N) No./Complete EIN
Street Address of Debtor (No. and Street, City, a 1918 Chadberry Walk	and State)	Street Addres	s of Joint Debtor (N	o. and Street	t, City, and Sta	te
Stockbridge, GA	ZIPCODE 30281					ZIPCODE
County of Residence or of the Principal Place of	Business:	County of Re	sidence or of the Pri	ncipal Place	of Business:	
Henry	-4 - 11	M-:1: A 4.4.		:c 4:cc	C44 - 1.1	().
Mailing Address of Debtor (if different from stre	et address):	Mailing Addi	ress of Joint Debtor (ii different i	from street add	iress):
	ZIPCODE					ZIPCODE
Location of Principal Assets of Business Debtor	(if different from street address al	bove):				ZIPCODE
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Filling Fee (Check one bound of the second of the seco	able to individuals only) Must at on certifying that the debtor is una (b). See Official Form No. 3A. apter 7 individuals only). Must	tach able Check	Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 Debts are pridebts, define \$101(8) as "individual presonal, fan purpose." Cone box: Chapter is a small busine betor is not a small busine chapter is not a sm	Nature (Check imarily consider in 11 U.S. incurred by a rimarily for a nily, or house the person as definition of	an a sehold sehold sehold sehold sehold self-ined in 11 U.S.C lefined in 11 U liquidated debiess than \$2,190 tion.	one box) etition for of a Foreign ling etition for of a Foreign ceeding Debts are primarily business debts C. § 101(51D) .S.C. § 101(51D) ts (excluding debts 0,000
Statistical/Administrative Information Debtor estimates that funds will be available for dist	tribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that, after any exempt property is edistribution to unsecured creditors.		paid, there will be	e no funds available for			
Estimated Number of Creditors 1-49 50-99 100-199 200-999	1000- 5000 5,001- 10,000	10,001- 25,000		0,001- 00,000	Over 100,000	
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million		0,000,001 1 billion	More than \$1 billion	
Estimated Liabilities \$0 to \$50,001 to \$100,001 to \$500,001 \$550,000 \$550,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million		0,000,001 1 billion	More than \$1 billion	

B1 (Official Fo	pm91864447-pwb Doc 1 Filed 09/29		52:50 Desc Main Page 2
Voluntary Pe (This page must b	etition be completed and filed in every case)	Name of Debor(s): Ronnie Lee Brincefield	
	All Prior Bankruptcy Cases Filed Within Last 8 Years (
Location Where Filed:	NONE	Case Number:	Date Filed:
Location Where Filed:	N.A.	Case Number:	Date Filed:
	ankruptcy Case Filed by any Spouse, Partner	•	
Name of Debtor:	NONE	Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A	Exhib (To be completed if del	
10K and 10Q) with	if debtor is required to file periodic reports (e.g., forms the Securities and Exchange Commission pursuant to d) of the Securities Exchange Act of 1934 and is requesting er 11)	whose debts are primar I, the attorney for the petitioner named in the fore the petitioner that [he or she] may proceed under States Code, and have explained the relief availal I further certify that I delivered to the debtor the	rily consumer debts) egoing petition, declare that I have informed chapter 7, 11, 12, or 13 of title 11, United ble under each such chapter.
Exhibit A	is attached and made a part of this petition.	X /s/ Jayson R. Davis Signature of Attorney for Debtor(s)	Date
Exhibit I If this is a joint po	d by every individual debtor. If a joint petition is filed, each D completed and signed by the debtor is attached and made a	a part of this petition.	hibit D.)
		arding the Debtor - Venue	
₫	Debtor has been domiciled or has had a residence, princip immediately preceding the date of this petition or for a lo	pal place of business, or principal assets in this	
	There is a bankruptcy case concerning debtor's affiliate, ş	general partner, or partnership pending in this D	District.
	Debtor is a debtor in a foreign proceeding and has its prin or has no principal place of business or assets in the Unit court] in this District, or the interests of the parties will b	ted States but is a defendant in an action or proc	ceeding [in federal or state
	Certification by a Debtor Who Resi (Check all ap	ides as a Tenant of Residential Propoplicable boxes)	erty
	Landlord has a judgment for possession of debtor's resident	ence. (If box checked, complete the following.)
	(Name of I	landlord that obtained judgment)	
	(Address	of landlord)	
	Debtor claims that under applicable non bankruptcy law, entire monetary default that gave rise to the judgment for		
	Debtor has included in this petition the deposit with the c	court of any rent that would become due during	the 30-day

period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

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Software
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Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Ronnie Lee Brincefield
	ntures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct.	
[If petitioner is an individual whose debts are primarily consumer debts and	I declare under penalty of perjury that the information provided in this petition
has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief	is true and correct, that I am the foreign representative of a debtor in a foreign
available under each such chapter, and choose to proceed under chapter 7.	proceeding, and that I am authorized to file this petition.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).	(Check only one box.)
	I request relief in accordance with chapter 15 of title 11, United States
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Code. Certified copies of the documents required by § 1515 of title 11 are attached.
	Pursuant to 11 U.S.C.\(\) 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting
V /a/ Dannia I as Dringsfield	recognition of the foreign main proceeding is attached.
X /s/ Ronnie Lee Brincefield Signature of Debtor	X
	-
X	(Signature of Foreign Representative)
Signature of Joint Debtor	
	(Printed Name of Foreign Representative)
Telephone Number (If not represented by attorney)	
	(D. ()
Date	(Date)
Signature of Attorney*	
X /s/ Jayson R. Davis	Signature of Non-Attorney Petition Preparer
Signature of Attorney for Debtor(s)	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer
JAYSON R. DAVIS 608053	as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices
Printed Name of Attorney for Debtor(s)	and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and,
Berry & Associates	3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition
Firm Name	preparers, I have given the debtor notice of the maximum amount before any
_2751 Buford Hwy Address	document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
Suite 400 Atlanta, GA 30324	
	Printed Name and title, if any, of Bankruptcy Petition Preparer
Telephone Number	Social Security Number (If the bankruptcy petition preparer is not an individual,
Date	state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the	Farmer or an enumerical fermion keeping (conductor) or a second conductor.
information in the schedules is incorrect.	Address
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided in this petition	v
is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	X
The debter requests relief in accordance with the charter of title 11	
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date
v	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.
XSignature of Authorized Individual	Names and Social Security numbers of all other individuals who prepared or
	assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Printed Name of Authorized Individual	
	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11
Date	and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. \$110: 18 U.S.C. \$156

B1 D (Official Form 1, Exhibit D) (12/08)

UNITED STATES BANKRUPTCY COURT Northern District of Georgia, Atlanta Division

In re Ronnie Lee Brincefield	Case No.
Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

B1 D (Official Form 1, Exh. D) (12/08) – Cont.

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□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Ronnie Lee Brincefield	
	RONNIE LEE BRINCEFIELD	
D-4		

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In re	Ronnie Lee Brincefield	Case No.	
	Debtor	(If known)	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C -Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
SFDD	Ownership subject to lien		176,000.00	186,959.06
1918 Chadberry Walk Stockbridge, GA 30281				
SFDD	Ownership subject to lien		115,000.00	117,079.00
512 Brookstone Way Stockbridge, GA 30281				
SFDD	ownership subject to lien		100,000.00	131,921.48
416 Billingham Drive Burlington, NC 27215				
			391,000.00	

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In re	Ronnie Lee Brincefield	Case No.	
	Debtor		(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash		100.00
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking		250.00
Security deposits with public utilities, telephone companies, landlords, and others.	X			
Household goods and furnishings, including audio, video, and computer equipment.		HHG		2,500.00
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothing		500.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.		Firearms		150.00
 Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			

In re Ronnie Lee Brincefield

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2004 Jeep Cherokee 1997 Mercedes SL320		9,500.00 9,550.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			

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In re	Ronnie Lee Brincefield	Case No.	
	Debtor	(If known)	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
31. Animals.	X			
32. Crops - growing or harvested. Give	X			
particulars. 33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
		continuation sheets attached Tot	.1	\$ 22,550.00

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In re Ronnie Lee Brincefield	Case No
Debtor	(If known)
SCHEDULE C - PRO	OPERTY CLAIMED AS EXEMPT
Debtor claims the exemptions to which debtor is entitled (Check one box)	under:
11 U.S.C. 8 522(b)(2)	Check if debtor claims a homestead exemption that exceeds

\$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Cash	OCGA §44-13-100(a)(6)	100.00	100.00
Checking	OCGA §44-13-100(a)(6)	250.00	250.00
HHG	OCGA §44-13-100(a)(4)	2,500.00	2,500.00
Clothing	OCGA §44-13-100(a)(4)	500.00	500.00
Firearms	OCGA §44-13-100(a)(4)	150.00	150.00

11 U.S.C. § 522(b)(3)

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B6D (Official Form 6D) (12/07)

In re	Ronnie Lee Brincefield	 Case No	
	Debtor	 (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 140460641			Lien: First Mortgage					31,921.00
Bac Home Loans Servici 450 American St Simi Valley, CA 93065			Security: SFDD 416 Billingham Drive, Burlington NC SURRENDER-scheduled for foreclosure 10/22/09				131,921.00	, , , , , , , , , , , , , , , , , , ,
			VALUE \$ 100,000.00					
ACCOUNT NO. 51163431			Incurred: 2001 Lien: First Mortgage					
Midland Mortgage Po Box 268888 Oklahoma City, OK 73216-8888			Security: SFDD-512 Brookstone Way Stockbridge,GA 30281				114,973.00	0.00
			VALUE \$ 115,000.00					
ACCOUNT NO. 4010295074864			Incurred: 2003 Lien: First Mortgage					
Regions Mortgage Po Box 181001 Hattiesburg, MS 39404-8001			Security: SFDD-1918 Chadberry Walk, Stockbridge, GA 30281 1. Current Account				130,551.00	0.00
			VALUE \$ 176,000.00					
_1continuation sheets attached			(Total o	Sub	tota	(x	\$ 377,445.00	\$ 31,921.00
•			(Total o	ո ա [s pa Γotal	(Se	\$	\$

(Report also on (If applicable, report also on Summary of Schedules) also on Statistical

(Use only on last page)

(If applicable, report s) also on Statistical Summary of Certain Liabilities and Related Data.) Case 09-85447-pwb Filed 09/29/09 Entered 09/29/09 14:52:50 Desc Main Doc 1 Page 12 of 63 Document

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In re	Ronnie Lee Brincefield		Case No	
		Debtor		(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 82470626 Usaa Federal Savings B 10750 Mcdermontt Freeway San Antonio, TX 78288			Lien: Second Mortgage Security: SFDD-1918 Chadberry Walk, Stockbridge, GA 30281 1. Current Account VALUE \$ 176,000.00				49,787.00	0.00
ACCOUNT NO. 2624 USAA Federal Savings Bank 10750 McDermott Freeway San Antonio, TX 78288			Incurred: 12/03 Lien: Title lien Security: 2004 Jeep Cherokee VALUE \$ 9,500.00				13,900.00	4,400.00
ACCOUNT NO. 1068 USAA Federal Savings Bank 10750 McDermott Freeway San Antonio, TX 78288			Incurred: 09/05 Lien: Title lien Security: 1997 Mercedes SL320 VALUE \$ 9,550.00				10,500.00	950.00
ACCOUNT NO. 2254 USAA Home Equity 10750 McDermott Freeway Sam Antonio, TX 78288			Lien: Second Mortgage Security: SFDD 416 Billingham Drive, Burlington NC SURRENDER VALUE \$ 100,000.00				33,968.06	0.00
ACCOUNT NO.			VALUE \$					
Sheet no. 1 of 1 continuation sheets attached Schedule of Creditors Holding Secured Claims	ed to		Su (Total(s) o	f thi	al (s is pa otal	ge)	\$ 108,155.06 \$ 485,600.06	\$ 5,350.00 \$ 37,271.00

(Use only on last page)

(If applicable, report (Report also on

Summary of Schedules) also on Statistical Summary of Certain Liabilities and Related Data.)

Case 09-85447-pwb

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B6E (Official Form 6E) (12/07)

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In re_	Ronnie Lee Brincefield	Case No	
	Debtor	(if known)	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Extensions of credit in an involuntary case

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

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B6E (Official Form 6E) (12/07) - Cont.

Ronnie Lee Brincefield In re	Case No(if known)
Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman	a grainst the debtor, as provided in 11 U.S.C. $\&$ 507(a)(6)
Deposits by individuals	
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or renta that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and Certain Other Debts Owed to Governmental Units	ar of property of services for personal, family, of nousehold use,
Taxes, customs duties, and penalties owing to federal, state, and local government	
Commitments to Maintain the Capital of an Insured Depository Instituti	ion
Claims based on commitments to the FDIC, RTC, Director of the Office of Thri Governors of the Federal Reserve System, or their predecessors or successors, to m U.S.C. § 507 (a)(9).	
Claims for Death or Personal Injury While Debtor Was Intoxicated	
Claims for death or personal injury resulting from the operation of a motor velcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	nicle or vessel while the debtor was intoxicated from using
* Amounts are subject to adjustment on April 1, 2010, and every three years therea adjustment.	after with respect to cases commenced on or after the date of

_ continuation sheets attached

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B6E (Official Form 6E) (12/07) - Cont.

In re	Ronnie Lee Brincefield	Case No	
	Debtor	(If kn	own)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Sec. 507(a)(8)

Type of Priority for Claims Listed on This Sheet

Type of Priority for Claims Listed on This Sheet									
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.			Consideration:						
Almance County Tax Commissioner 124 W. Elm St. Graham, NC 27253			Property Taxes				Notice Only	Notice Only	Notice Only
ACCOUNT NO.						\vdash			
ACCOUNT NO.						\vdash			
ACCOUNT NO.	H					\vdash			
Sheet no. 1 of 1 continuation sheets attached Creditors Holding Priority Claims	to S	chedu	e of (Totals of				\$ 0.00	\$	\$
		Sch	To e only on last page of the comp edule E.) Report also on the St chedules)	otal letec	1	*	\$ 0.00		
		Scho the S	To only on last page of the compedule E. If applicable, report al Statistical Summary of Certain illities and Related Data.)	so o	1	>	\$	\$ 0.00	\$ 0.00

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B6F (Official Form 6F) (12/07)

In re	Ronnie Lee Brincefield	,	Case No.	
	Debter	,		(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1702			Consideration: Account				
Advanta Po Box 8088 Philadelphia, PA 19101							8,860.00
ACCOUNT NO. 5584180005311702	+		1. Current Account	+		\vdash	
Advanta Bank Corp Po Box 844 Spring House, PA 19477			2. Account Closed By Grantor				Notice Only
ACCOUNT NO. 1005	+		Consideration: Credit card	+		H	
American Express Po Box 33336 Ft.Lauderdale, FL 30281							4,928.45
ACCOUNT NO. 1001	+		Consideration: Credit card	\dagger		\vdash	
American Express Po Box 360002 Ft. Lauderdale, FL 33336							10,403.00
16 continuation sheets attached Subtotal \$ 24,191.45							
communion sheets attached				Т	'otal	>	\$

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 3499909310344433 American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 3499905336663783 American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 005406481019315141 American Express*	AMOUNT OF CLAIM	(DISPUTED	UNLIQUIDATED	COLUMNOENT	CONTINGENT	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	HUSBAND, WIFE, JOINT ORCOMMUNITY	CODEBTOR	CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)
American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 3499909310344433 American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 3499905336663783 American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 005406481019315141 American Express*	4,876.00						Consideration: Credit card		•	American Express Po Box 360002
American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 3499905336663783 American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 005406481019315141 American Express*	ce Only	Notice (American Express* c/o Becket and Lee PO Box 3001
American Express* c/o Becket and Lee PO Box 3001 Malvern, PA, 19355 ACCOUNT NO. 005406481019315141 American Express*	ce Only	Notice (American Express* c/o Becket and Lee PO Box 3001
American Express*	ce Only	Notice (American Express* c/o Becket and Lee PO Box 3001
PO Box 3001 Malvern, PA, 19355	ce Only	Notice (•	American Express* c/o Becket and Lee PO Box 3001

Nonpriority Claims

Total➤ \$

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No.	_
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7301 American Express/Bank of America Po Box 17220 Baltimore, MD 21297			Consideration: Credit card				12,802.00
ACCOUNT NO. 2005 American Express/Delta Po Box 360002 Ft. Lauderdale, FL 33336-0002			Consideration: Credit card				15,110.00
ACCOUNT NO. 3499905893685563 Amex Po Box 297871 Fort Lauderdale, FL 33329			Collection Account Closed By Consumer				Notice Only
ACCOUNT NO. 3499909310344433 Amex Po Box 297871 Fort Lauderdale, FL 33329			Collection Account Closed By Grantor				Notice Only
ACCOUNT NO. 3499905336663783 Amex Po Box 297871 Fort Lauderdale, FL 33329			Collection Account Closed By Grantor				Notice Only

Sheet no. 2 of 16 continuation sheets attached to Schedule of Creditors Holding Unsecured

Subtotal➤ 27,912.00 \$ Total ➤

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 005406481019315141 Amex Po Box 297871 Fort Lauderdale, FL 33329			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 005406481019303382 Amex Po Box 297871 Fort Lauderdale, FL 33329			Paid Account Closed By Grantor				Notice Only
ACCOUNT NO. 232998000001 Associated Credit Unio 6251 Crooked Creek Dr Norcross, GA 30092			Current Account Account Closed By Consumer				Notice Only
ACCOUNT NO. 8487111 Bac Home Loans Servici 450 American St Simi Valley, CA 93065			Refinanced Account Closed ACCOUNT TRANSFERRED				Notice Only
ACCOUNT NO. 301 Bank Of America 4060 Ogletown/stan Newark, DE 19713			Current Account Account Closed By Grantor				Notice Only

to Schedule of Creditors Holding Unsecured Nonpriority Claims

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No	
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
CCOUNT NO. 9151 Bank of America To Box 15710 Vilmington, DE 19886			Consideration: Credit card				14,132.00
Bank of America to Box 60073 Vilmington, DE 19886			Consideration: Credit card				7,240.00
CCOUNT NO. 9808 Bk Of Amer 060 Ogletown/stan Jewark, DE 19713			Current Account Account Closed By Consumer				Notice Only
CCOUNT NO. 5128 Capital One O Box 70884 Charlotte, NC 28272			Consideration: Credit card				4,403.00
CCOUNT NO. 9808 Capital One O Box 71083 Charlotte, NC 28272-1083			Consideration: Credit card				1,600.72

to Schedule of Creditors Holding Unsecured

\$

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No	
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 424631514611 Chase Po Box 15298 Wilmington, DE 19850			Current Account Account Closed By Grantor				Notice Only
ACCOUNT NO. 418587157979 Chase Po Box 15298 Wilmington, DE 19850			Current Account Account Closed By Consumer				Notice Only
ACCOUNT NO. 418587084625 Chase Po Box 15298 Wilmington, DE 19850			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 418586064196 Chase Po Box 15298 Wilmington, DE 19850			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 1206 Chase Bus. Visa Po Box 15153 Wilmington, DE 19886			Consideration: Credit card				12,325.00
Sheet no. <u>5</u> of <u>16</u> continuation sheets at to Schedule of Creditors Holding Unsecured	tached			Sub	tota	 ≻	\$ 12,325.00

Nonpriority Claims

Total➤ \$

B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5183371670 Chase Na 800 Brooksedge Blvd Westerville, OH 43081			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 4305875930 Chase Na Po Box 15298 Wilmington, DE 19850			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 5183371670 Chase Na* Attn: Bankruptcy Dept PO Box 100018 Kennesaw, GA, 30156							Notice Only
ACCOUNT NO. 4305875930 Chase* Attn: Bankruptcy Dept PO Box 100018 Kennesaw, GA, 30156							Notice Only
ACCOUNT NO. 542418052293 Citi Po Box 6241 Sioux Falls, SD 57117			Current Account Account Closed By Consumer				Notice Only
Sheet no. 6 of 16 continuation sheets at to Schedule of Creditors Holding Unsecured	attached			Sub	tota	ı ≻	\$ 0.00

Nonpriority Claims

Total➤ \$

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	, Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Sioux Falls, SD 57117 ACCOUNT NO. 6527 Citibank Mastercard Po Box 688901 Des Moines, IA 50368 Consideration: Credit card Consideration: Account Citibusiness Card Po Box 688915 Des Moines, IA 50368 ACCOUNT NO. 6071001748161505 Citifinancial P.o. Box 499 Hanover, MD 21076 COUNT NO. 424631514611 Collection* Consideration: Account Consi	AMOUNT OF CLAIM	OF	DISPUTED	Gamina	UNLIQUIDATED	CONTINGENT	CONTINGENT		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	HUSBAND, WIFE, JOINT ORCOMMUNITY	CODEBTOR	CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)
Sioux Falls, SD 57117 ACCOUNT NO. 6527 Citibank Mastercard Po Box 688901 Des Moines, IA 50368 Consideration: Credit card Citibusiness Card Po Box 688915 Des Moines, IA 50368 Citibusiness Card Po Box 688915 Des Moines, IA 50368 1. Current Account 2. Account Closed By Consumer Not ACCOUNT NO. 6071001748161505 Citifinancial P.o. Box 499 Hanover, MD 21076 ACCOUNT NO. 424631514611 Collection* ACCOUNT NO. 424631514611 Collection* Not			T									Citi
Citibank Mastercard Po Box 688901 Des Moines, IA 50368 ACCOUNT NO. 9572 Citibusiness Card Po Box 688915 Des Moines, IA 50368 ACCOUNT NO. 6071001748161505 Citifinancial P.o. Box 499 Hanover, MD 21076 COllection* Attn: Bankrutpcy Department PO Box 10587 Consideration: Account L Current Account L Consideration: Account L Con	ice Only	Notice Onl										
Po Box 688901 Des Moines, IA 50368 Consideration: Account Con			\dagger	t	H	†	H		Consideration: Credit card			ACCOUNT NO. 6527
Citibusiness Card Po Box 688915 Des Moines, IA 50368 ACCOUNT NO. 6071001748161505 Citifinancial P.o. Box 499 Hanover, MD 21076 ACCOUNT NO. 424631514611 Collection* Attn: Bankrutpcy Department PO Box 10587 ACCOUNT NO. 42463157	14,539.00	14,5										Po Box 688901
Po Box 688915 Des Moines, IA 50368 ACCOUNT NO. 6071001748161505 Citifinancial P.o. Box 499 Hanover, MD 21076 ACCOUNT NO. 424631514611 Collection* Attn: Bankrutpcy Department PO Box 10587 ACCOUNT NO. 425061514611 Not			†	T		1			Consideration: Account			ACCOUNT NO. 9572
Citifinancial P.o. Box 499 Hanover, MD 21076 ACCOUNT NO. 424631514611 Collection* Attn: Bankrutpcy Department PO Box 10587 2. Account Closed By Consumer Not Not	11,074.00	11,0										Po Box 688915
ACCOUNT NO. 424631514611 Collection* Attn: Bankrutpcy Department PO Box 10587			\dagger	t	H	†	H				┢	ACCOUNT NO. 6071001748161505
Collection* Attn: Bankrutpcy Department PO Box 10587 Not	tice Only	Notice Onl							2. Account Closed By Consumer			P.o. Box 499
Attn: Bankrutpcy Department PO Box 10587 Not			\dagger	\dagger	T	†	T					ACCOUNT NO. 424631514611
	tice Only	Notice Onl										Attn: Bankrutpcy Department PO Box 10587
Sheet no. 7 of 16 continuation sheets attached to Schedule of Creditors Holding Unsecured \$\\$\$	25,613.00	\$ 25.6	+	al>	tota	bt	Sub	9		i	hed	

Nonpriority Claims

Total➤ \$

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B6F (Official Form 6F) (12/07) - Cont.

In re	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 418587157979 Collection* Attn: Bankrutpcy Department PO Box 10587 Greenville, SC, 29603							Notice Only
ACCOUNT NO. 8487111 Countrywide Home Lending* Attention: Bankruptcy SV-314B PO Box 5170 Simi Valley, CA, 93062							Notice Only
ACCOUNT NO. 9719417454020 Dsnb Macys 9111 Duke Blvd Mason, OH 45040			Current Account Account Closed By Consumer				Notice Only
ACCOUNT NO. 3810 Fort McPherson Credit Union 1732 Walker Ave, SW Fort McPherson, GA 30330			Consideration: Account				8,147.81
ACCOUNT NO. 441712726516 Fst Usa Bk B 900 N Market St Wilmington, DE 19801			Current Account Account Closed By Consumer				Notice Only
Sheet no. 8 of 16 continuation sheets att	ached			Sub	tota	ı ≻	\$ 8,147.81

to Schedule of Creditors Holding Unsecured Nonpriority Claims

\$

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 441712726516 Fst Usa Bk B* Attention: Card Member Services PO Box 15548 Wilmington, DE, 19886							Notice Only
ACCOUNT NO. 318050 Gemb/jcp Po Box 984100 El Paso, TX 79998			Current Account Account Closed By Consumer				Notice Only
ACCOUNT NO. 318050 Gemb/jcp* Attention: Bankruptcy PO Box 103106 Roswell, GA, 30076							Notice Only
ACCOUNT NO. 11141 Heilig Meyers 102 West Nash Str Spring Hope, NC 27882			Transferred Account Closed By Consumer				Notice Only
ACCOUNT NO. 76727031 Irwin Mortgage Corp 9265 Counselors Row Indianapolis, IN 46240			Transferred Account Closed				Notice Only

Sheet no. 9 of 16 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ➤
Total ➤

\$ 0.00

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No.	_
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 76727031							
Irwin Mortgage Corp* Attn: Bankruptcy Department PO Box 8068 Virginia Beach, VA, 23450							Notice Only
ACCOUNT NO. 9719417454020							
Macys/fdsb* Macy's Bankruptcy PO Box 8053 Mason, OH, 45040							Notice Only
ACCOUNT NO. 51163431							
Midland Mortgage Company* Attn: Bankruptcy PO Box 26648 Oklahoma City, OK, 73216							Notice Only
ACCOUNT NO. 0422			Consideration: Credit card debt				
Office Depot Po Box 68902 Des Moines, IA 50368-9020							854.02
ACCOUNT NO. 5189	+		Consideration: Credit card	\vdash	\vdash		
Sears Gold Mastercard Po Box 183082 Columbus, OH 43218-3082							Notice Only
Sheet no. 10 of 16 continuation sheets a to Schedule of Creditors Holding Unsecured	tached			Sub	tota	l ≻	\$ 854.02

Nonpriority Claims

Total➤ \$

B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Sears/cbsd 701 East 60th St N Sioux Falls, SD 57117			Current Account Account Closed By Grantor				Notice Only
Unvl/citi Po Box 6241 Sioux Falls, SD 57117			Current Account Account Closed By Consumer				Notice Only
ACCOUNT NO. 549113033239 Unvl/citi Po Box 6241 Sioux Falls, SD 57117			Current Account Account Closed By Consumer				Notice Only
ACCOUNT NO. 549113036175 Unvl/citi* Attn.: Centralized Bankruptcy PO Box 20507 Kansas City, MO, 64195							Notice Only
ACCOUNT NO. 549113033239 Unvl/citi* Attn.: Centralized Bankruptcy PO Box 20507 Kansas City, MO, 64195							Notice Only

Nonpriority Claims

Total➤ \$

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No.	_
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4010295074864 Up/regionsm* Bankruptcy PO Box 18001 Hattiesburg, MS, 39404							Notice Only
ACCOUNT NO. 1261 USAA Federal Savings 10750 McDermott Freeway San Antonio, TX 78288			Consideration: Account				18,877.00
ACCOUNT NO. 81502254 Usaa Federal Savings B 10750 Mcdermontt Freeway San Antonio, TX 78288			1. Account Closed By Grantor				31,156.00
ACCOUNT NO. 61371001 Usaa Federal Savings B Pob 47504 San Antonio, TX 78265			1. Current Account				Notice Only
ACCOUNT NO. 61371068 Usaa Federal Savings B Pob 47504 San Antonio, TX 78265			1. Current Account				Notice Only
Sheet no. 12 of 16 continuation sheets att to Schedule of Creditors Holding Unsecured	ached			Sub	tota	ı≻	\$ 50,033.00

Sheet no. 12 of 16 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal➤ \$

Total ➤ \$

Case 09-85447-pwb Doc 1 Filed 09/29/09 Entered 09/29/09 14:52:50 Desc Main Document Page 29 of 63

B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No.	_
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 33135021 Usaa Federal Savings B Pob 47504 San Antonio, TX 78265			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 34282624 Usaa Federal Savings B Pob 47504 San Antonio, TX 78265			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 549123722493 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288							Notice Only
ACCOUNT NO. 61371001 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288	-						Notice Only
ACCOUNT NO. 61371068 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288							Notice Only

to Schedule of Creditors Holding Unsecured Nonpriority Claims

\$

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B6F (Official Form 6F) (12/07) - Cont.

In re	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

ACCOUNT NO. 33135021 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 34282624 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 549123710103 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 549123710103 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 549123722493 Usaa Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 USAA Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 USAA Federal Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 USAA Federal Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 USAA Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 USAA Federal Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 USAA Federal Savings Bank Po Box 47504 San Antonio, TX 78265 Notice Only Notice Only	CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 34282624 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 549123710103 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 Notice Only Notice Only 1. Current Account 2. Account Closed By Consumer Notice Only ACCOUNT NO. 549123722493 Usaa Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 Usaa Savings Bank Po Box 47504 San Antonio, TX 78265 1. Paid 2. Account Closed By Consumer Notice Only Notice Only	ACCOUNT NO. 33135021				T			
USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 549123710103 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 Notice Only ACCOUNT NO. 549123722493 Usaa Savings Bank Po Box 47504 San Antonio, TX 78265 1. Current Account 2. Account Closed By Consumer Notice Only 1. Paid 2. Account Closed By Consumer Notice Only 1. Paid 2. Account Closed By Consumer Notice Only	10750 McDermott Fwy							Notice Only
Notice Only Notice Only ACCOUNT NO. 549123710103 USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 549123722493 Usaa Savings Bank Po Box 47504 San Antonio, TX 78265 1. Current Account 2. Account Closed By Consumer Notice Only Notice Only 1. Paid 2. Account Closed By Consumer Notice Only 1. Paid 2. Account Closed By Consumer Notice Only	ACCOUNT NO. 34282624				\dagger			
USAA Federal Savings Bank* 10750 McDermott Fwy San Antonio, TX, 78288 ACCOUNT NO. 549123722493 Usaa Savings Bank Po Box 47504 ACCOUNT NO. 549123710103 Usaa Savings Bank Po Box 47504 1. Current Account 2. Account Closed By Consumer Notice Only 1. Paid 2. Account Closed By Consumer Notice Only Notice Only	10750 McDermott Fwy							Notice Only
1. Current Account 2. Account Closed By Consumer Notice Only 1. Paid 2. Account Closed By Consumer ACCOUNT NO. 549123710103 Usaa Savings Bank Po Box 47504 1. Paid 2. Account Closed By Consumer Notice Only 1. Paid 2. Account Closed By Consumer Notice Only Notice Only	ACCOUNT NO. 549123710103				T			
Usaa Savings Bank Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 Usaa Savings Bank Po Box 47504 2. Account Closed By Consumer Notice Only 1. Paid 2. Account Closed By Consumer Notice Only	10750 McDermott Fwy							Notice Only
Po Box 47504 San Antonio, TX 78265 ACCOUNT NO. 549123710103 Usaa Savings Bank Po Box 47504 1. Paid 2. Account Closed By Consumer Notice Only	ACCOUNT NO. 549123722493	\vdash		1. Current Account	\dagger			
Usaa Savings Bank Po Box 47504 2. Account Closed By Consumer Notice Only	Po Box 47504			2. Account Closed By Consumer				Notice Only
San Antonio, 1X /8265	Usaa Savings Bank							Notice Only

Nonpriority Claims

Total➤ \$

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 10139445 Volvo Finance Na 1700 Jay Ell Dr Richardson, TX 75081			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 6965 Washington Mutual/Visa Credit Po Box 660487 Dallas, TX 75266			Consideration: Account				4,153.00
ACCOUNT NO. 4724771499 Wells Fargo Hm Mortgag 7255 Baymeadows Wa Jacksonville, FL 32256			1. Paid 2. Account Closed				Notice Only
ACCOUNT NO. 110110403818944 Wffinancial 7764 E Washington St Indianapolis, IN 46219			Paid Account Closed By Consumer				Notice Only
ACCOUNT NO. 383378015 Wfnnb/express 4590 E Broad St Columbus, OH 43213			Current Account Account Closed By Consumer				Notice Only
Sheet no. 15 of 16 continuation sheets atta	ched			Sub	tota	ı>	\$ 4,153.00

to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > \$ Total ➤

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Ronnie Lee Brincefield	Case No.	_
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 383378015							
Wfnnb/express* PO Box 182273 Columbus, OH, 43218							Notice Only
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							

Sheet no. 16 of 16 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ► \$ 0.00 Total ► \$ 185,481.00

Doc 1

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In re	Ronnie Lee Brincefield	Case No.	
	Debtor		(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

$\boldsymbol{+}$	
◩	Check this box if debtor has no executory contracts or unexpired leases

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

Main

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		Document	Pa	ge 34 of 63	

In re	Ronnie Lee Brincefield	Case No.	
	Debtor	-	(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

,	
ಠ	Check this box if debtor has no codebtors.
_	check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

None

In re_	Ronnie Lee Brincefield	Case	
	Debtor	Casc	(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Debtor's Marital	DEPENDENTS OF DEBTOR AND SPOUSE								
Status: Divorced	RELATIONSHIP(S): son, daughter		AGE(S): 25 years, 22 years						
Employment:		SPOUSE							
Occupation	Civilian Contractor								
Name of Employer	MPSA								
How long employed	1 year								
Address of Employer	6066 Leesburg Pike, Ste 900		N.A.						
	Falls Church, VA 22041-2234								
NCOME: (Estimate of ave	erage or projected monthly income at time case filed)		DEBTOR	SPO	OUSE				
. Monthly gross wages, sa	· ·	\$	3,708.00	\$	N.A				
(Prorate if not paid n	•	Ψ_	0.00		N.A				
. Estimated monthly over	rtime	\$_		\$					
. SUBTOTAL		\$_	3,708.00	\$	N.A				
. LESS PAYROLL DEDU	UCTIONS		7 00.00		37.4				
a. Payroll taxes and s	ocial security	\$	788.00 0.00	\$ \$	N.A N.A				
b. Insurance		\$. \$	0.00	\$ \$	N.A				
c. Union Duesd. Other (Specify:) \$	0.00	\$	N.A				
(
. SUBTOTAL OF PAYR	OLL DEDUCTIONS	\$	788.00	\$	N.A				
TOTAL NET MONTH	LY TAKE HOME PAY	\$	2,920.00	\$	N.A				
. Regular income from o	peration of business or profession or farm	\$	0.00	\$	N.A				
(Attach detailed stateme	ent)								
3. Income from real prope	rty	\$	0.00	\$	N.A				
. Interest and dividends		\$	0.00	\$	N.A				
•	ce or support payments payable to the debtor for the	\$	0.00	\$	N.A				
debtor's use or that of d	-								
 Social security or othe (Specify) 	a government assistance	\$	0.00	\$	N.A				
2. Pension or retirement	income		3,347.00	\$	NI A				
3. Other monthly income		\$ \$	5,347.00	\$ \$	N.A N.A				
(Specify) Rental Inco	•	\$	950.00	\$	N.A				
4. SUBTOTAL OF LINE	S 7 THROUGH 13	\$	4,838.00	\$	N.A				
5. AVERAGE MONTHL	Y INCOME (Add amounts shown on Lines 6 and 14)	\$	7,758.00	\$	N.A				
	GE MONTHLY INCOME (Combine column totals		\$	7,758.00	_				
from line 15)		(Report also on Summa	ary of Schedules	and, if app	olicable.				

B6J (Officials Food 1968 1544 177) pwb	Doc 1	Filed 09/29/0	9 Entered 09/29/09 14:52:50	Desc Main
•		Document	Page 36 of 63	

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In re Ronnie Lee Brincefield	Case No(if known)	
Debtor	(if known)	
SCHEDULE J - CURRENT E	XPENDITURES OF INDIVIDUAL DE	BTOR(S)
	ge or projected monthly expenses of the debtor and the debtor's fami-annually, or annually to show monthly rate. The average month om income allowed on Form 22A or 22C.	
Check this box if a joint petition is filed and debtor' labeled "Spouse."	s spouse maintains a separate household. Complete a separate scho	edule of expenditures
Rent or home mortgage payment (include lot rented for m.)	obile home)	\$1.170.00
	YesNo √	1,170,00
	Ves No	
2. Utilities: a. Electricity and heating fuel		\$400.00
b. Water and sewer		\$100.00
c. Telephone		\$250.00
d. Other <u>Cable</u> , <u>Internet</u>		\$150.00
3. Home maintenance (repairs and upkeep)		\$150.00
4. Food		\$500.00
5. Clothing		\$100.00
6. Laundry and dry cleaning		\$100.00
7. Medical and dental expenses		\$132.00
8. Transportation (not including car payments)		\$538.00
9. Recreation, clubs and entertainment, newspapers, magazin	es, etc.	\$0.00
10.Charitable contributions		\$0.00
11.Insurance (not deducted from wages or included in home	mortgage payments)	
a. Homeowner's or renter's		\$0.00
b. Life		\$35.00
c. Health		\$38.00
d.Auto		\$114.00
e. Other		_ \$0.00
12. Taxes (not deducted from wages or included in home more	tgage payments)	
(Specify)		_ \$50.00
13. Installment payments: (In chapter 11, 12, and 13 cases, d	o not list payments to be included in the plan)	
a. Auto		\$0.00
b. Other <u>Second Mortgage</u>		\$381.00
c. Other <u>Grooming</u>		_ \$100.00
14. Alimony, maintenance, and support paid to others		\$0.00
15. Payments for support of additional dependents not living	\$0.00	
16. Regular expenses from operation of business, profession,		\$0.00
17. Other <u>Midland mtg on rental prop</u>	_ \$950.00	

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

a. Average monthly income from Line 15 of Schedule I

b. Average monthly expenses from Line 18 above

5,258.00

7,758.00

2,500.00

Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 4.4.9-740 - 30377

None

20. STATEMENT OF MONTHLY NET INCOME

c. Monthly net income (a. minus b.)

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court

Northern District of Georgia, Atlanta Division

In re	Ronnie Lee Brincefield	Case No.	
	Debtor		
		Chapter 13	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 391,000.00		
B – Personal Property	YES	3	\$ 22,550.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	2		\$ 485,600.06	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	17		\$ 185,481.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 7,758.00
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 5,258.00
тот	TAL .	31	\$ 413,550.00	\$ 671,081.06	

Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 4.4.9-740 - 30377

In re	Ronnie Lee Brincefield	Case No.		
	Debtor			
		Chapter	13	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	0.00

State the Following:

State the Lond wing.		
Average Income (from Schedule I, Line 16)	\$	7,758.00
Average Expenses (from Schedule J, Line 18)	\$	5,258.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$	7,596.00

State the Following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 37,271.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 185,481.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 222,752.00

Ronnie Lee Brincefield	

In re		
	Debtor	

Case No. ____ (If known)

	CERNING DEBIOR'S SCHEDULES ENALTY OF PERJURY BY INDIVIDUAL DEBTOR	
I declare under penalty of perjury that I have read the are true and correct to the best of my knowledge, information,	e foregoing summary and schedules, consisting of33 sheets, and and belief.	that they
	Signature:/s/ Ronnie Lee Brincefield	
Date	Signature:	
Date	Signature: Not Applicable	
	(Joint Debtor, if any)	
	[If joint case, both spouses must sign.]	
DECLARATION AND SIGNATURE OF NON-AT	TORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)	
compensation and have provided the debtor with a copy of this de 110(h) and 342(b); and, (3) if rules or guidelines have been prom	petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this docu- ocument and the notices and information required under 11 U.S.C. §§ 1 ulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services of the maximum amount before preparing any document for filing for a contraction.	10(b), chargeable
Printed or Typed Name and Title, if any,	Social Security No. (Required by 11 U.S.C. § 110.)	
of Bankruptcy Petition Preparer	(Required by 11 O.S.C. § 110.) if any), address, and social security number of the officer, principal, responsible perso	n <i>autu</i>
who signs this document.	y any), adaress, and social security number of the officer, principal, responsible perso	m, or pariner
Address		
v		
XSignature of Bankruptcy Petition Preparer	Date	
	ssisted in preparing this document, unless the bankruptcy petition preparer is not an in	dividual:
If more than one person prepared this document, attach additional signed shee	ets conforming to the appropriate Official Form for each person.	
A bankruptcy petition preparer's failure to comply with the provisions of title 11 and 18 U.S.C. § 156.	the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. L	1 U.S.C. § 110;
DECLARATION UNDER PENALTY OF PERJ	URY ON BEHALF OF A CORPORATION OR PARTNERSHIP	
or an authorized agent of the partnership] of the	ent or other officer or an authorized agent of the corporation or a membe [corporation or partnership] named as debto coregoing summary and schedules, consisting of sheets (total at to the best of my knowledge, information, and belief.	
Date	Signature:	
	[Print or type name of individual signing on behalf of de	_
[An individual signing on behalf of a partnership	or corporation must indicate position or relationship to debtor.]	

Case 09-85447-pwb Doc 1 Filed 09/29/09 Entered 09/29/09 14:52:50 Desc Main

UNITED STATES BANKRUPTCY COURT

Northern District of Georgia, Atlanta Division

In Re	Ronnie Lee Brincefield	Case No.	
		(if known)	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2009	36,000.00	
2008	16,000.00	
2007	0.00	

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2009	32,000.00	Military Pension
2008	43,000.00	Military Pension

None

3. Payments to creditors

Complete $a.\ or\ b.,\ as\ appropriate,\ and\ c.$

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF AMOUNT AMOUNT STILL PAYMENTS PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF AMOUNT AMOUNT STILL AND RELATIONSHIP TO DEBTOR PAYMENTS PAID OWING

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

Amex Account 09SV556BW

State Court of Henry County

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

Filed

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and Receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

CCCS 9/25/09 50.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

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If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

M

List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE **ENVIRONMENTAL** LAW

List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

M

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF **NOTICE**

ENVIRONMENTAL LAW

List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None \square

> NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN **ADDRESS**

NATURE OF BUSINESS BEGINNING AND ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, record and financial statements None List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor. M NAME AND ADDRESS DATES SERVICES RENDERED None List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy \boxtimes case have audited the books of account and records, or prepared a financial statement of the debtor. NAME **ADDRESS** DATES SERVICES RENDERED List all firms or individuals who at the time of the commencement of this case were in possession of the None books of account and records of the debtor. If any of the books of account and records are not available, explain. \boxtimes NAME **ADDRESS** None List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the two years immediately preceding the commencement of this case by \boxtimes the debtor. NAME AND ADDRESS DATE **ISSUED** 20. Inventories None List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory. M DATE OF INVENTORY INVENTORY SUPERVISOR DOLLAR AMOUNT OF INVENTORY

List the name and address of the person having possession of the records of each of the two inventories

reported in a., above.

DATE OF INVENTORY

None

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NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

(Specify cost, market or other basis)

NAME & ADDRESS OF

RECIPIENT, RELATIONSHIP

TO DEBTOR

	21. Current Partners, Officers,	Directors and Shareholders	
None	a. If the debtor is a partner	ship, list the nature and percentage of pa	rtnership interest of each member of the partners
	NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
None			the corporation, and each stockholder who voting or equity securities of the corporation.
	NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
	22. Former partners, officers, o	lirectors and shareholders	
None	a. If the debtor is a par immediately preceding the co		rew from the partnership within one year
	NAME	ADDRESS	DATE OF WITHDRAWAL
None		rporation, list all officers, or directors	s whose relationship with the corporation t of this case.
N	IAME AND ADDRESS	TITLE	DATE OF TERMINATION
	23. Withdrawals from a partr	ership or distribution by a corporation	
None	insider, including compensati		als or distributions credited or given to an demptions, options exercised and any other of this case.

DATE AND PURPOSE

OF WITHDRAWAL

AMOUNT OF MONEY OR

DESCRIPTION AND

VALUE OF PROPERTY

24. Tax Consolidation Group

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date

Signature of Debtor

/s/ Ronnie Lee Brincefield

RONNIE LEE BRINCEFIELD

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0__ continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. \$152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110(c).)
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and partner who signs this document.	l social security number of the officer, principal, responsible person, or
parties the signs and accument	
A 11	
Address	
X	
Signature of Bankruptcy Petition Preparer	Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT

Northern District of Georgia, Atlanta Division NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

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<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security
X	number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.	

Cor	tificata	of the	Debtor
cer	uncate	or the	Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Ronnie Lee Brincefield	X/s/ Ronnie Lee Brincefield
Printed Name(s) of Debtor(s)	Signature of Debtor Date
Case No. (if known)	X
	Signature of Joint Debtor (if any) Date

In re	Ronnie Lee Brincefield	According to the calculations required by this statement: The applicable commitment period is 3 years.
	Debtor(s)	☑ The applicable commitment period is 5 years.
		☑ Disposable income is determined under § 1325(b)(3).
Case	Number: (If known)	☐ Disposable income not determined under § 1325(b)(3).
	(i. i.i.)	(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedule I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I. REPOR	T OF INCOME					
	a. 💆	ul/filing status. Check the box that applies and con Unmarried. Complete only Column A ("Debtor's Married. Complete both Column A ("Debtor's In	Income") for Lines 2-10.					
1	six ca	ures must reflect average monthly income received lendar months prior to filing the bankruptcy case, er the filing. If the amount of monthly income varied the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the six-month total by six, and enter the six-month total by six-month to	nding on the last day of the mo during the six months, you m	onth	1	Column A Debtor's Income	s	olumn B pouse's ncome
2	Gross	wages, salary, tips, bonuses, overtime, commis	ssions.		\$	3,708.00	\$	N.A.
3	Line a than o attachi	ne from the operation of a business, profession and enter the difference in the appropriate column(some business, profession or farm, enter aggregate nument. Do not enter a number less than zero. Do not ess expenses entered on Line b as a deduction	 s) of Line 3. If you operate members and provide details on a tinclude any part of the 	ore				
	a.	Gross receipts	\$ 0.00					
	b.	Ordinary and necessary business expenses	\$ 0.00					
	C.	Business income	Subtract Line b from Line a		\$	0.00	\$	N.A.
4	differe not in Part I		enter a number less than zero ed on Line b as a deductior	in ¬				
	a.	Gross receipts	\$ 950.00	-				
	b.	Ordinary and necessary operating expenses	\$ 950.00 Subtract Line b from Line a	_				
	C.	Rent and other real property income	Subtract Line biroin Line a		\$	0.00	\$	N.A.
5	Intere	est, dividends and royalties.			\$	0.00	\$	N.A.
6	Pensi	on and retirement income.			\$	3,347.00	\$	N.A.
7	expen that p	mounts paid by another person or entity, on a rises of the debtor or the debtor's dependents, i urpose. Do not include alimony or separate mainted debtor's spouse.	ncluding child support paid	for	\$	0.00	\$	N.A.
8	Howev was a	ployment compensation. Enter the amount in the ver, if you contend that unemployment compensation benefit under the Social Security Act, do not list the n A or B, but instead state the amount in the space	n received by you or your spou amount of such compensation	ıse				
		mployment compensation claimed to a benefit under the Social Security Act Debtor \$_	0.00 Spouse \$ N.A.		\$	0.00	\$	N.A.

9	sources separa payme under t	e from all other sources. Specify source and amount. If necess on a separate page. Total and enter on Line 9. Do not include te maintenance payments paid by your spouse, but include nts of alimony or separate maintenance. Do not include an he Social Security Act or payments received as a victim of a war of ty, or as a victim of international or domestic terrorism. VA Disability	alimore all other	ny or her fits receive	d			
	b.		\$	0.00	$\left. \right] \left. \right _{\$}$	541	.00	\$ N.A.
10		al. Add Lines 2 thru 9 in Column A, and, if Column B is completed 9 in Column B. Enter the total(s).	d, add I	Lines 2	\$	7,596	.00	\$ N.A.
11		If Column B has been completed, add Line 10, Column A to Line total. If Column B has not been completed, enter the amount A.			d \$			7,596.00
		Part II. CALCULATION OF § 1325(b)(4) 0	OMN	/IITMEN	T PE	RIOD		
12	Enter	the Amount from Line 11.					\$	7,596.00
13	that cald your spo on a reg the basi of perso purpose	adjustment. If you are married, but are not filing jointly with sculation of the commitment period under § 1325(b)(4) does not recuse, enter on Line 13 the amount of the income listed in Line 10 gular basis for the household expenses of you or your dependents is for excluding this income (such as payment of the spouse's tax ons other than the debtor or the debtor's dependents) and the amount of the spouse's tax and the committee of the spouse's tax ons other than the debtor or the debtor's dependents) and the amount of the spouse's tax ons other than the debtor or the debtor's dependents. If necessary, list additional adjustments on a separate page. If the spouse's tax of the s	equire , Colum and sp liability ount of	inclusion of on B that w becify, in the or the spo fincome de	the incas NOTe lines use's s	paid below, upport to each		
	C.		\$	0.00				
	Total ar	nd enter on Line 13.					\$	0.00
14	Subtra	ct Line 13 from Line 12 and enter the result.					\$	7,596.00
15		lized current monthly income for §1325(b)(4). Multipuber 12 and enter the result.	oly the	amount fro	m Line	14 by	\$	91,152.00
16	househo the bank	able median family income. Enter the median family incomed bld size. (This information is available by family size at www.usdokruptcy court.)	j.gov/u	ust/ or from	the cl	erk of		
	a. Enter	debtor's state of residence: Georgia b. Enter debtor'	s house	ehold size:	3		\$	61,959.00
17	□ TI ap	ne amount on Line 15 is less than or equal to the amount on Line 15 is less than or equal to the amount on Line 15 is more than the line 15 is more tha	ount on the state on the state of the state	on Line 1 ment and o	continu ne box	e with th for "The	iis st appl	atement.
Pa	art III.	APPLICATION OF § 1325(b)(3) FOR DETER	RMIN	IING DI	SPO	SABLI	E II	NCOME
18	Enter t	he Amount from Line11.					\$	7,596.00

B22C (Official Form 22C) (Chapter 13) (01/08) - Cont.

19	the tot househ Columi than th necess	al adjustment. If you are man al of any income listed in Line 1 hold expenses of you or your de in B income (such as payment of the debtor or the debtor's depen- ary, list additional adjustments apply, enter zero.	10, Column B ependents. Sp f the spouse's dents) and th	that was NOT paid or pecify, in the lines be s tax liability or the sp he amount of income of	n a regular low, the b pouse's su devoted to	r basis for asis for e apport of position and and and and and and and and and an	the xcluding the persons other pose. If		
	a.				\$	0.00			
	b.				\$	0.00			
	C.				\$	0.00			
	Total a	and enter on Line 19.						\$	0.00
20	Curre	nt monthly income for §1	325(b)(3)	. Subtract Line 19 fr	om Line 1	8 and ent	er the result.	\$	7,596.00
21		alized current monthly in	come for §	1325(b)(3). Mult	iply the ar	mount fro	m Line 20 by		7,570.00
		mber 12 and enter the result.						\$	91,152.00
22	Applic	cable median family incor	ne. Enter t	he amount from Line	16.			\$	61,959.00
	Appli	cation of §1325(b)(3). Cl	neck the appl	icable box and procee	ed as direc	cted.			
23	is s	The amount on Line 21 is a determined under §1325(b)(3 tatement. The amount on Line 21 is a name is not determined under this statement. Do not complete	not more t §1325(b)(3)	o of page 1 of this state than the amount of at the top of page 1	tement an	d comple 22. Che	te the remaini	ng par ' " Dis _l	rts of this posable
		Part IV. CALC	JLATION	OF DEDUCTION	ONS FR	OM IN	ICOME		
	Subp	art A: Deductions un	der Stan	dards of the li	nterna	I Reve	nue Servi	ice (IRS)
24A	misce the ap	nal Standards: food, clotle llaneous. Enter "Total" amoulicable family size and income							
	the cie	rk of the bankruptcy court.)						\$	1 152 00
	Nation	rk of the bankruptcy court.) nal Standards: health care. E	level. (This in	nformation is available a1 below the amount	e at <u>www.</u>	usdoj.gov National S	/ust/ or from Standards for	\$	1,152.00
24B	Nation Out-of- for per- clerk or under of or olde 16b). the res	rk of the bankruptcy court.)	Enter in Line as under 65 year (This informal in Line b1 the numbers of the numbers of the numbers of the the b2 the numbers of the	a1 below the amount ars of age, and in Line tion is available at we number of members of yes must be the same as amount for household o obtain a total amount	from IRS e a2 the II www.usdoj s of your h your house s the num members nt for hous	National : RS Nation gov/ust/ of cousehold who ber state under 65 sehold me	Standards for al Standards or from the who are are 65 years d in Line and enter mbers 65	\$	1,152.00
24B	Nation Out-of- for per- clerk of under of or olde 16b). the res and old enter t	rk of the bankruptcy court.) nal Standards: health care. Expected Health Care for persons sons 65 years of age or older. If the bankruptcy court.) Enter 65 years of age, and enter in Ligr. (The total number of househ Multiply line a1 by Line b1 to okult in Line c1. Multiply Line a2 der, and enter the result in Line	Enter in Line as under 65 year (This informal in Line b1 the numbers of all a total a by Line b2 to c2. Add Line	a1 below the amount ars of age, and in Line tion is available at we number of members of yes must be the same as amount for household o obtain a total amount	from IRS e a2 the II www.usdoj.c g of your h your house s the num members at for hous a a total he	National S RS Nation gov/ust/ () lousehold whold who ber stated under 65 sehold me ealth care	Standards for al Standards or from the who are are 65 years d in Line d, and enter mbers 65 amount, and	\$	1,152.00
24B	Nation Out-of- for per- clerk of under of or olde 16b). the res and old enter t	rk of the bankruptcy court.) nal Standards: health care. Expected Health Care for persons sons 65 years of age or older. If the bankruptcy court.) Enter 65 years of age, and enter in Lir. (The total number of househ Multiply line a1 by Line b1 to old ult in Line c1. Multiply Line a2 der, and enter the result in Line he result in Line 19B.	Enter in Line as under 65 year (This informal in Line b1 the numbers of all a total a by Line b2 to c2. Add Line	a1 below the amount ars of age, and in Line ation is available at we have number of members of yes must be the same as amount for household to obtain a total amount es c1 and c2 to obtain	from IRS e a2 the II www.usdoj.c g of your h your house s the num members nt for hous n a total he	National S RS Nation gov/ust/ of lousehold who ber stated under 65 sehold me ealth care	Standards for al Standards or from the who are are 65 years d in Line d, and enter mbers 65 amount, and	\$	1,152.00
24B	Nation Out-of- for per- clerk or under of or olde 16b). the res and old enter t	rk of the bankruptcy court.) nal Standards: health care. Expecket Health Care for persons sons 65 years of age or older. If the bankruptcy court.) Enter 65 years of age, and enter in Lier. (The total number of househ Multiply line a1 by Line b1 to obuilt in Line c1. Multiply Line a2 der, and enter the result in Line he result in Line 19B. Tehold members under 65 years of the summer of members Number of members	Enter in Line as under 65 years of age	a1 below the amount ars of age, and in Line ation is available at we number of members of yes must be the same as amount for household o obtain a total amounes c1 and c2 to obtain Household members	from IRS e a2 the II www.usdoj.g of your h your house s the num members ht for hous a total he ers 65 yea er member	National S RS Nation gov/ust/ of lousehold who ber stated under 65 sehold me ealth care	Standards for al Standards or from the who are are 65 years d in Line and enter mbers 65 amount, and	\$	1,152.00
24B	Nation Out-of- for per- clerk or under or or olde 16b). the res and old enter t	rk of the bankruptcy court.) nal Standards: health care. Expecket Health Care for persons sons 65 years of age or older. If the bankruptcy court.) Enter 65 years of age, and enter in Ling. (The total number of househ Multiply line a1 by Line b1 to obuilt in Line c1. Multiply Line a2 der, and enter the result in Line he result in Line 19B. The sehold members under 65 years and enter the member with the service of the serv	Enter in Line as under 65 years of age	a1 below the amount ars of age, and in Lincolar at the last of age, and in Lincolar at a war and a second and a second a second a colar at the last of	from IRS e a2 the II www.usdoj.g of your h your house s the num members ht for hous a total he ers 65 yea er member	National S RS Nation gov/ust/ of lousehold who ber stated under 65 sehold me ealth care	Standards for all Standards for all Standards for from the who are are 65 years do in Line and enter mbers 65 amount, and e or older 144.00	\$	1,152.00 180.00
24B	Nation Out-of- for per- clerk or under or or olde 16b). the res and old enter t Hous b1. c1.	rk of the bankruptcy court.) nal Standards: health care. Expecket Health Care for persons sons 65 years of age or older. If the bankruptcy court.) Enter 65 years of age, and enter in Lier. (The total number of househ Multiply line a1 by Line b1 to obuilt in Line c1. Multiply Line a2 der, and enter the result in Line he result in Line 19B. Tehold members under 65 years of the summer of members Number of members	Enter in Line as under 65 yes (This informal in Line b1 the ne b2 the nur hold members otain a total a by Line b2 to c2. Add Line ears of age 60.00 3 180.00 utilities; ne	a1 below the amount ars of age, and in Line ation is available at was a number of members obtain a total amount for household obtain a total amount of and c2 to obtain the description of the members of members	from IRS e a2 the II www.usdoj.g of your house s the num members at for house a total he ers 65 yea er member members	National S RS Nation gov/ust/ (nousehold who ber stated under 65 sehold me ealth care	Standards for al Standards for al Standards for from the who are are 65 years d in Line and enter mbers 65 amount, and e or older 144.00 0 0.00	\$	

	amount (this int Line b t	Standards: housing and utilities; mortgage/rent expension of the IRS Housing and Utilities Standards; mortgage/rent expensions available at www.usdoj.gov/ust/ or from the clerk of the total of the Average Monthly Payments for any debts secured be taken before the time a and enter the result in Line 25B. Do not enter the Line before the Line before the time and the line and the	se for your he bankrup y your hom	county and family size tcy court); enter on ne, as stated in Line 47	:	
25B	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	1,084.00		
256	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$	1,551.00		
	C.	Net mortgage/rental expense	Subtract I	Line b from Line a.	\$	0.00
26	Lines 2 Housin	Standards: housing and utilities; adjustment. If you can be allowed accurately compute the allowance to which you are allowed accurately compute the allowance to which you are allowed amount to which you he basis for your contention in the space below:	ou are enti	itled under the IRS	\$	0.00
27A	You are operation operatio	Standards: transportation; vehicle operation/public e entitled to an expense allowance in this category regardless of wing a vehicle and regardless of whether you use public transportation the number of vehicles for which you pay the operating expenses designed as a contribution to your household expenses in Linchecked 0, enter on Line 27A the "Public Transportation" amount fortation. If you checked 1 or 2 or more, enter on Line 27A the "Operal Standards: Transportation for the applicable number of vehicle ical Area or Census Region. (These amounts are available at www.bankruptcy.court.)	hether you fon. ATLA or for which ne 7. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	pay the expenses of NTA the operating 1 V 2 or more. cal Standards: sts" amount from blicable Metropolitan	\$	452.00
27B	the ope entitled Transp	Standards: transportation; additional public transportation erating expenses for a vehicle and also use public transportation, and to an additional deduction for your public transportation expense portation amount from the IRS Local Standards: Transportation. (usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	and you cor s, enter on	ntend that you are Line 27B the "Public	\$	0.00
28	of vehice expense Enter, (availal Averag	Standards: transportation ownership/lease expense; cles for which you claim an ownership/lease expense. (You may no e for more than two vehicles.) 1 1 2 or more. in Line a below, the "Ownership Costs" for "One Car" from the IRS ble at www.usdoj.gov/ust/ or from the clerk of the bankruptcy coule Monthly Payments for any debts secured by Vehicle 1, as stated and enter the result in Line 28. Do not enter an amount less the IRS Transportation Standards, Ownership Costs, First Car Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 Net ownership/lease expense for Vehicle 1	t claim an of Local Standrt); enter in Line 47; an zero.	ownership/lease dards: Transportation n Line b the total of the	e \$	314.00

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			andards: transportation ownership/lease expense;	Vehicle 2. Complete this Line		
	only if you checked the "2 or more" Box in Line 28 Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b					
29	from Line a and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car \$ 489.00					
		b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 232.00		
		C.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	257.00
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.			\$	838.00	
31	Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.				\$	0.00
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.				\$	35.00
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49.					0.00
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.					0.00
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.				\$	0.00
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.			\$	0.00	
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service – such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.				\$	40.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.					3,696.00

Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37								
	Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.							
	آ	a.	Health Insurance		\$	38.00		
39		b.	Disability Insurance		\$	0.00		
0,		C.	Health Savings Accou	nt	\$	0.00	\$	
	Total and enter on Line 39 If you do not actually expend this total amount, state your actual average expenditures in the space below: \$ 0.00							38.00
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.						\$	0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly							0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You							0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.							0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.							0.00
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month or charitable contributions in the form of cash or financial instruments to a charitable organization as defined in in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.							0.00
46								38.00
			Sı	ubpart C: Deductions for I	Debt Payment			
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes and insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in th 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.							
		N	lame of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?		
	a.	Regio	ns Mortgage	SFDD	\$ 1,170.00	☐ yes V no		
	b.	USAA	Λ	SFDD	\$ 381.00	☐ yes ▼ no		
	C.	USAA	\	2004 Jeep Cherokee	\$ 231.66	☐ yes ▼ no		
				*See cont. pg for additional debts	Total: Add Lines a, b and c		\$	1,957.66

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	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.					
48		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount		
	a.			\$ 0.00		
	b.			\$ 0.00		
	C.			\$ 0.00		
				Total: Add Lines a, b and c	\$	0.00
49	clair	ns, such as priority tax, child supp	ity claims. Enter the total amount port and alimony claims, for which you de current obligations, such as the	ou were liable at the time of	\$	0.00
		apter 13 administrative exper the resulting administrative exp	enses. Multiply the amount in Line ense.	a by the amount in Line b, and		
	a. Projected average monthly Chapter 13 plan payment. \$ 2,500.00					
50	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	C.	Average monthly administra	tive expense of Chapter 13 case	X 5 % Total: Multiply Lines a and b	\$	125.00
51	Tot	al Deductions for Debt Payı	ment. Enter the total of Lines 47 th	hrough 50.	\$	2,082.66
		Subpa	rt D: Total Deductions from	m Income	,	
52	Tot	al of all deductions from inc	come. Enter the total of Lines 38, 4	6, and 51.	\$	5,816.66
	F	Part VI. DETERMINATI	ON OF DISPOSABLE INC	OME UNDER § 1325(I	b) (2	2)
53	Tot	al current monthly income.	Enter the amount from Line 20.		\$	7,596.00
54	disa	bility payments for a dependent cl	nly average of any child support payi hild, reported in Part I, that you rece extent reasonably necessary to be ex	eived in accordance with	\$	0.00
55	emp	oloyer from wages as contributions	ns. Enter the monthly total of (a) as for qualified retirement plans, as sport plans, as specified in § 362(b)(19	pecified in § 541(b)(7) and (b)	\$	0.00
56	Tot	al of all deductions allowed	l under § 707(b)(2). Enter the	amount from Line 52.	\$	5,816.66

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	Deduction for special expenses for which there resulting expenses in line expenses and enter the to of theses expenses and that make such expenses	and the page. Total the pocumentation				
57	Nat	ure of special circumstances	Amount	of expense		
	a.		\$			
	b.		\$			
	C.		\$			
			Total: Add	Lines a, b and c	\$	0.00
						0.00
58	Total adjustments to 57 and enter the result.	o determine disposable income. Add	d the amounts on Lin	es 54, 55, 56 and	\$	5,816.66
59	Monthly Disposable	Income Under § 1325(b)(2). Subs	tract Line 58 from Lin	e 53 and enter		1 770 24
	the result.				\$	1,779.34
	the result.	Part VI: ADDITIONAL EXI	PENSE CLAIMS	6	>	1,779.34
	Other Expenses. List health and welfare of you income under § 707(b)(2	Part VI: ADDITIONAL EXI and describe any monthly expenses, not of and your family and that you contend shot (A)(ii)(I). If necessary, list additional source for each item. Total the expenses.	otherwise stated in th	is form, that are r	equire ur cur	ed for the rent monthly
60	Other Expenses. List health and welfare of you income under § 707(b)(2	and describe any monthly expenses, not of and your family and that you contend should be an additional source.	otherwise stated in th	is form, that are r	equire ur cur ould r	ed for the rent monthly
60	Other Expenses. List health and welfare of you income under § 707(b)(2	and describe any monthly expenses, not of and your family and that you contend shot)(A)(ii)(I). If necessary, list additional souther for each item. Total the expenses.	otherwise stated in th	is form, that are rededuction from you age. All figures sh	equire ur cur ould r	ed for the rent monthly
60	Other Expenses. List health and welfare of you income under § 707(b)(2 average monthly expense	and describe any monthly expenses, not of and your family and that you contend shot)(A)(ii)(I). If necessary, list additional souther for each item. Total the expenses.	otherwise stated in th ould be an additional ources on a separate pa	is form, that are rededuction from you age. All figures sh	equire ur cur ould r	ed for the rent monthly
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60	Other Expenses. List health and welfare of you income under § 707(b)(2 average monthly expense a. b. c.	and describe any monthly expenses, not of and your family and that you contend shot)(A)(ii)(I). If necessary, list additional south for each item. Total the expenses. Expense Description Total: Add Lines a, b a	otherwise stated in the buld be an additional carces on a separate parameter of the state of the	Monthly Amo 3. 0.00 3. 0.00 4. 0.00 5. 0.00 6. 0.00 7. 0.00 8. 0.00 9. 0.00 10.00	equire ur cur ould r unt	ed for the rent monthly eflect your

(Debtor)

(Joint Debtor, if any)

_____ Signature: _

Income Month 1			Income Month 2		
Gross wages, salary, tips	3,708.00	0.00	Gross wages, salary, tips	3,708.00	0
Income from business	0.00	0.00	Income from business	0.00	0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	C
Pension, retirement	3,347.00	0.00	Pension, retirement	3,347.00	C
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	C
Unemployment	0.00	0.00	Unemployment	0.00	0
Other Income	541.00	0.00	Other Income	541.00	C
Income Month 3			Income Month 4		
Gross wages, salary, tips	3,708.00	0.00	Gross wages, salary, tips	3,708.00	C
Income from business	0.00	0.00	Income from business	0.00	(
Rents and real property income	0.00	0.00	Rents and real property income	0.00	(
Interest, dividends	0.00	0.00	Interest, dividends	0.00	(
Pension, retirement	3,347.00	0.00	Pension, retirement	3,347.00	(
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	(
Unemployment	0.00	0.00	Unemployment	0.00	(
Other Income	541.00	0.00	Other Income	541.00	(
Income Month 5			Income Month 6		
Gross wages, salary, tips	3,708.00	0.00	Gross wages, salary, tips	3,708.00	C
Income from business	0.00	0.00	Income from business	0.00	C
Rents and real property income	0.00	0.00	Rents and real property income	0.00	C
Interest, dividends	0.00	0.00	Interest, dividends	0.00	C
Pension, retirement	3,347.00	0.00	Pension, retirement	3,347.00	C
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	(
Unemployment	0.00	0.00	Unemployment	0.00	(
Other Income	541.00	0.00	Other Income	541.00	(

Line 47: USAA 97 Mercedes SL320 175.00

Additional Items as Designated, if any

Remarks

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UNITED STATES BANKRUPTCY COURT

	of Georgia, Atlanta Division
In re: Ronnie Lee Brincefield	Case No.
	Chanton 12
Debt	Chapter 13 or(s)
Debt	or(s)
DISCLOSURE OF COMPEN	SATION Rule 2016 (b)
1. Pursuant to 11 U.S.C. §329(am the attorney for the above-names de	a) and Bankruptcy Rule 2016(b), I certify that I btor(s).
petition in bankruptcy, or agreed to be p	o me within one year before the filing of the baid to me, for services rendered or to be rendered ion of or in connection with the bankruptcy case
3. Prior to the filing, the debtor.	r(s) have paid 0.00
4. The source of the compensation	ion paid, or to be paid to me was the debtor.
5. I have not agreed to share the person unless they are members and ass	e above-disclosed compensation with any other ociates of my law firm.
6. If this is a Chapter 13 proceed Debtor(s) a copy of the statement entitle	ding, I certify that I have provided to the ed "Rights and Responsibilities".
Date:09/29/09	/s/

Jayson R. Davis